


PTO/SB/31 (04-05)

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<input checked="" type="checkbox"/> attorney or agent of record.								
Registration number <u>35914</u>	<div style="text-align: center;">  Jeffrey Karceski Typed or printed name </div>							
	<div style="text-align: center;"> 202-663,8403 Telephone number </div>							
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34.								
Registration number if acting under 37 CFR 1.34. _____	<div style="text-align: center;"> August 7, 2006 Date </div>							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.								
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